



**PROCUREMENT AND SUPPLY
COMMONWEALTH HEALTHCARE CORPORATION
HEALTH INFORMATION TECHNOLOGY
REQUEST FOR PROPOSAL (RFP)**

**PROCUREMENT FOR DATA COLLECTION SERVICES FOR
CNMI BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM**

RFP25-CHCC/ HIT-022

SUBMISSION DEADLINE: SEPTEMBER 30, 2025 TIME: 4:30 PM (CHST)

INTERESTED PARTIES CAN DOWNLOAD THIS REQUEST FOR PROPOSAL FROM THE CHCC WEBSITE [WWW.CHCC.HEALTH]. ONCE AT THE SITE, NAVIGATE TOWARDS THE BOTTOM AND SELECT THE **REQUEST FOR PROPOSALS** TAB. CLICK ON THE URL FOR THIS RFP/ITB.

THE CHCC RESERVES THE RIGHT TO REJECT ANY AND ALL PROPOSAL AND TO WAIVE ANY IMPERFECTIONS IN ANY PROPOSAL, IF TO DO SO SHALL BE IN THE INTEREST OF THE CHCC. ALL PROPOSALS SHALL BECOME THE EXCLUSIVE PROPERTY OF THE COMMONWEALTH HEALTHCARE CORPORATION.

/S/ ESTHER L. MUNA
CHCC CHIEF EXECUTIVE OFFICER

/S/ CORA P. ADA
DIRECTOR OF PROCUREMENT & SUPPLY



COMMONWEALTH HEALTHCARE CORPORATION DETAILED REQUIREMENTS AND SCOPE OF WORK



HEALTH INFORMATION TECHNOLOGY REQUEST FOR PROPOSAL (RFP)

PROCUREMENT FOR DATA COLLECTION SERVICES FOR CNMI BEHAVIORAL RISK FACTOR SURVEILLANCE SYSTEM (BRFSS)

“RFP25-CHCC/HIT-022”

I. BACKGROUND INFORMATION

The Commonwealth Healthcare Corporation (CHCC), located in the Commonwealth of the Northern Mariana Islands (CNMI), is soliciting proposals from qualified vendors to serve as the data collection contractor for the CNMI Behavioral Risk Factor Surveillance System (BRFSS). The BRFSS is a state-based telephone surveillance system designed to collect data on individual risk behaviors and preventive health practices that are related to the leading causes of morbidity and mortality in the United States. It is conducted in all 50 states, the District of Columbia, and U.S. territories with financial and technical support from the Centers for Disease Control and Prevention (CDC).

As a participant in this nationwide system, CNMI contributes to a standardized data collection effort that allows for comparisons across jurisdictions and provides critical health data that are not available from other sources within the CNMI. The information gathered through the BRFSS helps inform local public health policies, programs, and resource allocation decisions. These data are essential for tracking health trends, identifying emerging public health issues, and guiding evidence-based decision-making in the CNMI.

To support this important work, the CHCC and CNMI BRFSS require a qualified contractor to conduct annual telephone-based health surveys in the CNMI using a CATI (Computer-Assisted Telephone Interviewing System). The selected contractor must demonstrate relevant experience with telephone-based survey research and show evidence of sufficient staffing, equipment (e.g., CATI system), and financial capacity to successfully meet all contract obligations, including adhering to data quality standards and submission timelines established by the CDC.

Proposals are welcome from qualified vendors located both within the CNMI and off-island; all submissions will receive equal consideration.

This RFP package contains the necessary information and guidelines for interested vendors to develop and submit proposals.

II. NATURE OF WORK

The purpose of this contract is to conduct annual telephone-based health surveys using a representative sample of non-institutionalized adults aged 18 and older in the CNMI. All surveys must follow BRFSS methodology, sampling protocols, and CDC quality assurance standards to ensure valid and reliable data collection. The selected contractor will be responsible for programming the standardized BRFSS questionnaire into a CATI system. The questionnaire, provided by the CDC, includes required core questions and optional modules that CNMI can decide whether or not to include. Additional CNMI-specific questions may also be incorporated.

Following data collection, the selected contractor will be required to provide machine-readable datasets and submit them on a monthly basis. These datasets will be used by the CNMI BRFSS and CDC to generate statistically valid estimates for key health indicators in the CNMI.

The contract term will begin at the start of either the calendar year or the fiscal year and will run for one year, with the option to renew annually for up to four additional years. Renewal is contingent upon satisfactory performance in accordance with CDC grant requirements and is subject to the discretion of CHCC, as well as the appropriation, allocation, and availability of funds. Payment will be made based on the completion of interviews or may be negotiated based on available funds, in accordance with the agreed-upon deliverables and schedule.

During the contract period, the selected contractor is expected to provide data collection services in close collaboration with CNMI BRFSS and CDC staff. The contractor must carry out the scope of work in a professional, efficient, and timely manner, and in full compliance with the requirements outlined in Section IV of this RFP.

III. LOCATION OF WORK

The work will be carried out at the contractor's operational site. Daily presence at CHCC facilities is not required. Tasks may be completed in person, remotely, or through virtual/telecommunication methods.

The selected contractor will also be expected to attend national BRFSS conferences and regional BRFSS meetings as part of ongoing coordination and professional development. Additionally, CNMI BRFSS and/or CDC staff may conduct scheduled site visits to the contractor's operational site(s) as part of routine monitoring and compliance.

Travel expenses related to BRFSS conferences or site visits will be covered by CNMI BRFSS and CHCC, in accordance with CHCC travel policies.

IV. DETAILED SCOPE OF WORK

Technical Support and Responsibilities

1. The Contractor will perform the surveillance and reporting activities necessary to fulfill the requirements of the BRFSS. To support these efforts, the CDC will provide certain technical assistance, including:
 - *Programming of the CATI questionnaire (core and optional modules) for Ci3 software.*
 - *Provision of the telephone sample.*
 - *Provision of reformatting and editing programs developed by CDC.*
 - *Editing criteria and data layout.*

This technical assistance is intended to ensure consistent survey administration across all jurisdictions participating in BRFSS. The Contractor is expected to have the technical capability to integrate this support into their operations while maintaining full responsibility for local implementation, data collection, and quality assurance.

2. Sign contract which includes a statement that CHCC and/or CNMI BRFSS retains all rights to the completed interviews and data sets, and that the Contractor will not release any survey information or discuss the results without prior written approval from CHCC and/or CNMI BRFSS.

Interview Operations

3. Conduct interviews in accordance with procedures and specifications supplied by the CDC and CNMI BRFSS. This includes, but not limited to, conducting interviews during the week period specified by CDC each month, randomly selecting an adult respondent in each household, and providing the monthly raw data sent to CNMI BRFSS in the form specified.
4. Ensure that interviewers have experience in conducting telephone interviews. Facilitate training of interviewers in the administration of the BRFSS questionnaire; include practice interviews. Ensure that interviewers are briefed on the new questionnaire and have opportunities to conduct practice interviews using the new questionnaire before its implementation. Training to conduct BRFSS activities will be determined by the CNMI BRFSS Coordinator, who will be overseeing the contractor. The coordinator will assess the contractor's capabilities and determine the type and level of technical assistance and consultation needed.
5. The contractor shall conduct telephone interviews each month with non-institutionalized CNMI residents aged 18 years or older, completing a total of 500 interviews annually as specified in the contract. Each interview is expected to take approximately 20–25 minutes. Interviewing must be carried out consistently throughout the 12-month contract period, with no month falling below the minimum number of completed interviews required to meet the annual target. The targeted response rate, as calculated by the

Council of American Survey Research Organizations (CASRO) method, must not decrease.

Telephone interviews should be conducted according to the following schedule, based on Chamorro Standard Time (CHST):

- Conduct 20% of the interviews on weekdays
- Conduct 80% on weeknights and weekends
- Change schedules to accommodate holidays and special events
- Make weekday calls just after the dinner hour (6:00pm – 8:00pm CHST)
- Make appointment callbacks during hours that are not scheduled for other interviews, generally on weekdays

Quality Assurance and Monitoring

6. Develop and maintain procedures to ensure confidentiality of information provided by survey respondents.
7. Implement procedures for assuring and documenting the quality of the interviewing process and the data management steps. Provide supervision and monitoring of interviewers. Monitoring is to be conducted through the use of unobtrusive, electronic two-way audio and video means. If possible, remote monitoring should be made available.
8. When required, the contractor must have the capability to increase the sample size and include additional questions for an additional fee. The CNMI BRFSS Program will serve as the coordinator for developing state added questions. Additional payments may be made to cover the costs of extra programming, pretesting of new questions, and increasing the sample size. Separate billings will be required for state added questions and sample size increases, and the contractor will be responsible for providing a detailed breakdown of all costs.
9. Maintain adequate records to support costs associated with this agreement. Such records shall, at a minimum, include personnel time records signed and approved by supervisory personnel and additional records supporting computer time and equipment rental, telephone lines, supplies, and other costs.
10. In the event that a systematic, recurring error is discovered in the sampling or interviewing operations, immediately notify CNMI BRFSS of the error, correct it at no cost to CNMI, and provide documentation of both the occurrence and the correction.
11. If CNMI BRFSS finds problems in reviewing datasets, correct these to CNMI's satisfaction within 2 to 4 weeks of notification, at no cost to CNMI. CNMI may then require the contractor to implement additional data consistency checks.

Reporting Systems and Deliverables

12. Monthly Status Reports are considered to be progress reports covering project activities during the prior month. The report should be consistent with the contractor's proposal, as amended or approved in writing by the CNMI BRFSS Program. The report shall provide a discussion of monthly survey efficiency with recommendations and plans for improvements. This full report for a particular month is due within (5) working days of the end of the interview month.

The monthly status report should include the following:

- Status of monthly number of completes versus monthly targets by stratum or island.
 - Status of need for additional samples.
 - The Survey Efficiency, CARSO, cooperation rate;
 - A record of the disposition of all monthly calls;
 - A record of the outcome of supervisor verified interviews;
 - A report of any changes in interview staff;
 - The number of interview hours and evaluation of their performance;
 - A summary of the daily number of attempted calls, completed interviews, and dispositions by stratum.
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- Monthly Datasets. Data from interviews conducted each month shall be submitted in electronic form either via e-mail or password protected electronic media to the CNMI BRFSS Program Coordinator on a monthly basis and within five (5) working days after the end of the month provided that the data set has passed the PC-Edit program of CDC. The dataset includes the entire total sample files following the data element layout provided by CDC and the state added question layout for samples that were not called, samples that were called but not contacted, samples that were called but refused, records of partial interviews, records of completed interviews. However, telephone numbers and other personal identifiable information should not be included in those monthly submissions of files.
 - If CNMI BRFSS identifies issues during data set review, the Contractor must resolve them to CNMI BRFSS's satisfaction within two weeks of notification, at no cost. Additionally, CNMI BRFSS may request the Contractor to perform further data consistency checks.
 - The Offeror shall conduct data analysis and prepare annual reports using BRFSS data on selected topics by the CNMI BRFSS. A final report shall be "camera-ready" for printing by CNMI BRFSS. The final report shall include analysis of weighted BRFSS data where appropriate, taking into account the complex sample design of the BRFSS, and presenting the prevalence

estimates and the associated standard errors of those prevalence estimates on all results in both tables and graphs where appropriate.

Data Privacy and HIPAA Compliance

13. The Contractor shall comply with all applicable federal and local laws and regulations governing the privacy and security of health information, including the Health Insurance Portability and Accountability Act (HIPAA). The Contractor must sign a Business Associate Agreement (BAA) with CHCC prior to the commencement of work and demonstrate the ability to implement appropriate administrative, physical, and technical safeguards to protect the confidentiality, integrity, and availability of protected health information (PHI).
14. The Contractor must ensure that all personnel with access to PHI receive training in HIPAA compliance, and that PHI is handled, stored, and transmitted in a secure manner in accordance with CHCC policies and relevant legal requirements.

V. INFORMATION AND FORMAT REQUIRED IN THE PROPOSAL

All RFPs submitted by the prospective vendors MUST contain the following information:

1. **Cover page.** The page should indicate the RFP number and published program name, contractor's name, address, telephone number, date of submission, authorized official and title, project period, and type of organization. The signature of the official with legal authority to bind the organization into a contractual agreement should also be included.

The cover page must also contain assurances that:

- The organization agrees to comply with all applicable rules, regulations, statutes, and laws related to the program, including procurement rules and compliance requirements established by the Government, CHCC, and CNMI BRFSS.
- The organization agrees to comply with all applicable privacy and security laws, including the Health Insurance Portability and Accountability Act (HIPAA), and is willing to sign a Business Associate Agreement (BAA) with CHCC if selected.
- The organization has adequate financial resources to perform the contract or the ability to obtain the finances.
- The organization has not filed for, nor is in the process of filing for bankruptcy.
- The organization is legally qualified to contract with the Commonwealth of the Northern Mariana Islands.

2. **Organizational capacity and structure.** This section should include a brief history of the organization, focusing on experience relevant to the project. Describe the support staff, computer resources, and any other resources available to the project. Organizational structure should also include the number of available interviewers, foreign language interviewers, and licensed workstations.
3. **Narrative.** In this section, the contractor should describe the products or services that will be provided in response to the requirements mentioned in Section IV of this RFP. The narrative should include the following:
 - A detailed history of telephone interview surveillance experience, specifying experience with the BRFSS or similar health-related surveys, bilingual interviewing, random-digit-dialing, and preparing results in an ASCII file.
 - A history of experience with random-digit-dialing sample technique. A description of the sampling technique that will be used, including a justification for its use as a probability sample in which all households have a known chance of being selected.
 - Evidence of acceptable performance on past surveys as measured by the following quality assurance indicators: CASRO or other response rate (indicate how calculated), refusal rate, refusal conversion, and timeliness of providing data and corrections.
 - A description of the CATI system to be used and the contractor's experience with that system. The CATI system must permit data entry at the time of interview, provide error and range checking, be programmed for skip patterns, and, if possible, manage the telephone sample.
 - A description of procedures used to monitor interviews and verify responses.
 - A description of procedures for training interviewers, including annual plans for briefings on the new questionnaire.
 - Workplan/schedule of activities. This section should describe the specific activities required to implement the proposed services, how these activities relate to project objectives, and the dates that they will be completed. The persons responsible for each task should be specified.
 - Staff. This section should include an organizational chart highlighting the persons or unit(s) responsible for the project. Describe the qualifications and relevant experience of the project supervisor and key interviewing staff. Specify the involvement of the project supervisor and

the key interviewing staff in terms of hours/days to be spent on the project. Attach the resumes of the principal investigator, key supervisory staff, and all other persons involved in the project, detailing length of experience in survey projects, experience with telephone surveys, and experience with CATI software.

- Budget and budget justification. Contractors must submit a detailed budget proposal outlining major categories of cost. Justification for each budget item must be included. The contractor must also provide a separate calculation for the cost of adding and processing questions to the questionnaire.
- CHCC reserves the right to request for additional information or documents that it may consider necessary and relevant to assist it in evaluating a proposal.

VI. GENERAL AND ADMINISTRATIVE INFORMATION

a. Posting of RFP

Interested parties can download this Request for Proposal (RFP) from the CHCC Website [www.chcc.health]. Once at the site, navigate to the RFP tab located at the bottom of the site. Click on the URL for this **RFP22-CHCC/HIT-022**. You will be required to enter data to allow us to track all requests for this opportunity.

b. General Provision

Until the selection process is completed, the content of the proposal will be held in the strictest confidence and no details of any proposal will be discussed outside the Evaluation Team created by the Corporation. This RFP does not constitute an offer and does not obligate the Corporation in any way. The Corporation reserves the right to reject any or all proposals for any reason and waive any defect in said proposals, negotiate with any qualified offers, or cancel part or its entirety this RFP, if it is in the best interest of the Corporation.

CHCC will enter a contract(s) with the successful vendor(s) pursuant to the terms of the standard government independent contract. Additional terms and conditions will be attached as exhibits to the standard Contract Agreement.

c. Place, Date, and Time of Submission

Proposers shall submit proposals and all supporting documents to **Corazon P. Ada, Director, CHCC Division of Procurement and Supply, at procurement@chcc.health no later than: 1630hrs (4:30pm) Chamorro Standard Time on September 30, 2025.**

Please note submission instructions:

- All submissions must include the **RFP25-CHCC/HIT-022** and Project Title in the email subject.
- All documents must be submitted in Adobe PDF Format.
- All pages of your proposal must include the RFP/ITB # and Project Title in the header, plus page number in the footer.

Proposers may opt to submit out (4) hard copies in addition to the original proposal (5 in total) to the CHCC Division of Procurement and Supply, CHCC Main Office, Saipan.

Failure to follow the instructions regarding the submission of RFP/ITB responses may result in the CHCC's choice to disqualify such proposals.

d. Cost of Preparation

All costs incurred by the vendor in preparing a response to this RFP and subsequent inquiries shall be done by the vendor. All proposals and accompanying documentation will become the property of CHCC and will not be returned. The Commonwealth Healthcare Corporation reserves the right to reject any or all bids for any reason and to waive any defects in said bid, if in its sole opinion, to do so would be in the best interest of CHCC.

e. Questions, Clarifications, or Inquiries

All questions or requests for clarification must be made in writing through email by close of business **September 22, 2025**. No oral comment, response, answer, or direction from other CHCC Personnel is binding unless also furnished in writing to all prospective bidders.

Please email all inquiries to:

- **Corazon P. Ada**
Director, Procurement and Medical Supply Office
Email: cora.ada@chcc.health
Tel. No. 670-234-8950 ext. 3561

And/Or

- **Junalyn L. Billedo**
Project Coordinator, CNMI Behavioral Risk Factor Surveillance System
Email: junalyn.billedo@chcc.health
Tel. No. 670-234-8950 ext. 2723

VII. EVALUATION CRITERIA

- a. After the evaluation process, CHCC plans to make an award to the vendor whose proposal is most advantageous to the Corporation considering the evaluation factors set forth below:

1. **40%** Organizational Profile and Capacity
2. **20%** Feasibility and Appropriates of Proposal
3. **20%** Proposed Implementation of Proposal
4. **20%** Cost Effectiveness of Proposed Budget

Total = 100%

b. **Cost Criteria**

Price is also a factor for consideration and price will be evaluated in comparison with the overall merit of the proposals. Technical merit is more important than price and the Corporation reserves the right to award the contract other than the lowest priced proposal. As proposals become more equal in technical merit, the importance of price will increase.

VIII. SELECTION PROCESS

Proposals submitted will be evaluated and selection will be made based on the evaluation criteria mentioned in Section VII. Upon selection, the successful Contractor will be advised to negotiate their fees with CHCC. Should the negotiation fail to result in an agreement, CHCC reserves the right to cancel the negotiation and select the next Contractor, which in CHCC's opinion, is the most qualified proposer and based upon the Evaluation Results. If the contract is not agreed to with any of the responsible Contractors, the RFP will be cancelled and re-advertised pursuant to §140-80.1-210 Competitive Sealed Proposals.

Approved By: 
Esther L. Muna, PhD, FACHE, MHA
Chief Executive Officer

Date: 08/27/25

Approved By:  8-
Corazon P. Ada
Director of Procurement & Supply

Date: 08/27/25